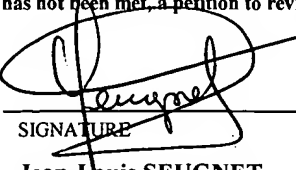


U.S. APPLICATION NO. (IF KNOWN)	INTERNATIONAL APPLICATION NO.	ATTORNEYS DOCKET NUMBER
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IAP12 Rec'd PCT/PTO 06 JAN 2006

NOT APPLICABLE		PCT/FR2004/001763		RN03103	
24. The following fees are submitted:				CALCULATIONS PTO ONLY	
BASIC NATIONAL FEE (37 CFR 1.492 (a) (1) - (5)):					
<input checked="" type="checkbox"/>	a) Basic National Fee.....		\$300.00		
<input checked="" type="checkbox"/>	b) examination fee		\$200.00		
<input checked="" type="checkbox"/>	c) Search Fee.....		\$500.00		
<input type="checkbox"/>	Additional fee for specification and drawings filed in paper over 100 sheets The fee is \$250.00 for each additional 50 sheets of paper or fraction thereof.....		\$0.00		
Total of above calculation.....			\$1000.00		
ENTER APPROPRIATE BASIC FEE AMOUNT =				\$1000.00	
Surcharge of \$130.00 for furnishing the oath or declaration later than months from the earliest claimed priority date (37 CFR 1.492(e)). <input type="checkbox"/> 20 <input type="checkbox"/> 30				\$0.00	
CLAIMS	NUMBER FILED	NUMBER EXTRA	RATE		
Total Claims	14 - 20 =	0	X \$50.00	\$0.00	
Independent Claims	2 - 3 =	0	X \$200.00	\$0.00	
Multiple Dependent Claims (Check if applicable)			+ \$360.00	\$0.00	
TOTAL OF ABOVE CALCULATIONS =				\$0.00	
<input type="checkbox"/> Applicant claims small entity status. (See 37 CFR 1.127). The fees indicated above are reduced by 1/2.				\$0.00	
SUBTOTAL =				\$1,000.00	
Processing fee of \$130.00 for furnishing the English translation later than months from the earliest claimed priority date (37 CFR 1.492 (f)). <input type="checkbox"/> 20 <input type="checkbox"/> 30				\$0.00	
TOTAL NATIONAL FEE =				\$1,000.00	
Fee for recording the enclosed assignment (37 CFR 1.21(h)). The assignment must be accompanied by an appropriate cover sheet (37 CFR 3.28, 3.31) (check if applicable)			<input type="checkbox"/>	\$0.00	
TOTAL FEES ENCLOSED =				\$1,000.00	
				Amount to be: refunded	\$
				charged	\$
<p>a. <input type="checkbox"/> A check in the amount of \$ _____ to cover the above fees is enclosed.</p> <p>b. <input checked="" type="checkbox"/> Please charge my Deposit Account No. 18-1171 in the amount of \$1,000.00 to cover the above fees.</p> <p>c. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. 18-1171. A duplicate copy of this sheet is enclosed.</p> <p>d. <input type="checkbox"/> Fees are to be charged to a credit card. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p> <p>NOTE: Where an appropriate time limit under 37 CFR 1.494 or 1.495 has not been met, a petition to revive (37 CFR 1.137 (a) or (b)) must be filed and granted to restore the application to pending status.</p>					
SEND ALL CORRESPONDANCE TO					
Jean-Louis SEUGNET					
RHODIA INC.					
259 Prospect Plains Road					
CN 7500					
CRANBURY, NJ 08512					
 SIGNATURE Jean-Louis SEUGNET NAME Reg. No. L0088 REGISTRATION NUMBER January 06, 2005 DATE					

LAUSANNE-CHAMPTO 06 JAN 2006

PO6A/REV02